		PART E	19-29- B- FEE(S) TRANS	O B MITTAL		
SEP 2-8 2006	89. (b)	her with applicable	C: P. Al or <u>Fax</u> (5	ommissioner for O. Box 1450 lexandria, Virgin 71)-273-2885	Patents nia 22313-1450	
maintenane CURRENT CORRESPOND  22851	ed below or directed officions.  ENCE ADDRESS (Note: Use Bi	ock I for any change of address)	a) specifying a new corresponding to the correspond	espondence address; a te: A certificate of m e(s) Transmittal. This bers. Each additional   we its own certificate of Certi	ed). Blocks 1 through 5 shill be mailed to the current and/or (b) indicating a separatiling can only be used for certificate cannot be used for paper, such as an assignment of mailing or transmission.  ficate of Mailing or Transmission.	rate "FEE ADDRESS" for domestic mailings of the or any other accompanying at or formal drawing, must mission
M/C 480-410-20 PO BOX 5052 TROY, MI 4800 10/02/2006 BASFAW2	)2	10607925	Str add tra	tes Postal Service with dressed to the Mail submitted to the USPTO	Fee(s) Transmittal is being th sufficient postage for firs Stop ISSUE FEE address O (571) 273-2885, on the day	(Class mail in an envelope above, or being facsimile the indicated below.  (Depositor's name)  (Signature)
2 FC:1504 300.00 DA  APPLICATION NO. FILING DATE		FIRST NAMED INVENTO	R /	4TTORNEY DOCKET NO.	CONFIRMATION NO.	
10/607,925 TITLE OF INVENTION	06/27/2003 : METHOD FOR THE I	TI DETECTION OF COATI	nomas Hubert Van Steenk NGS USING EMISSIVI		DP-309452 /ITY	8694
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/20/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS	7		
РНАМ, НОА Q		2877	356-237200			
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3. ASSIGNEE NAMÉ A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	/pe)		
PLEASE NOTE: Un recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing an	patent. If an assignee n assignment.	e is identified below, the do	cument has been filed for
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CIT	Y and STATE OR CO	OUNTRY)	
DELPHI TECHNOLOGIES, INC.			TROY, MICHIGAN			
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent) :	Individual 🗷 Con	 poration or other private gro	up entity
4a. The following fee(s)	are submitted: To small entity discount p		A check is enclosed.		previously paid issue fee s	hown above)

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